Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NEW YORK	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your	James First name P. Middle name Magyar Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
	meeting with the trustee.	Last name and odnix (or., or., ii, iii)	Last name and odnix (of., of., ii, iii)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9597	

Case):
INs.
from yours, fill it otices to this
Code
nis petition, I n any other

Deb	otor 1 James P. Magyar				Case number (if known)	
Par	t 2: Tell the Court About	our Bankruptc	y Case			
7.	The chapter of the Bankruptcy Code you are			n of each, see <i>Notice Required by</i> of page 1 and check the appropriat	11 U.S.C. § 342(b) for Individuals Filing e box.	for Bankruptcy
	choosing to file under	Chapter 7				
		☐ Chapter 11				
		☐ Chapter 12				
		☐ Chapter 13				
8.	How you will pay the fee	about how order. If y	w you may pay. Typ	pically, if you are paying the fee yo	k with the clerk's office in your local cou ourself, you may pay with cash, cashier's alf, your attorney may pay with a credit o	s check, or money
		☐ I need to	pay the fee in ins	stallments. If you choose this option	on, sign and attach the Application for In	ndividuals to Pay
		`	9	ts (Official Form 103A).		
		but is not applies to	required to, waive by your family size a	your fee, and may do so only if yo nd you are unable to pay the fee ir	n only if you are filing for Chapter 7. By I our income is less than 150% of the offici n installments). If you choose this option cial Form 103B) and file it with your petit	ial poverty line that n, you must fill out
9.	Have you filed for bankruptcy within the	■ No.				
	last 8 years?	☐ Yes.				
		Dist	rict	When	Case number	
		Dist	rict	When	Case number	
		Dist	rict	When	Case number	
10.	Are any bankruptcy	■ No				
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.				
		Deb	tor		Relationship to you	
		Dist	rict	When	Case number, if known	
		Deb	tor		Relationship to you	
		Dist	rict	When	Case number, if known	
11.	Do you rent your	□ No. Go	to line 12.			
	residence?	■ Yes. Ha	s your landlord obt	ained an eviction judgment agains	t you?	
		— 163.	No. Go to line	12.		
		_	Yes. Fill out <i>Ir</i> bankruptcy pe		Judgment Against You (Form 101A) and	d file it with this

Deb	otor 1 James P. Magyar				Case number (if known)
Par	Report About Any Bu	ısinesses	You Own	as a Sole Propriet	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of bus	iness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Stat	e & ZIP Code
	it to this petition.		Check		x to describe your business:
					ness (as defined in 11 U.S.C. § 101(27A))
				-	Estate (as defined in 11 U.S.C. § 101(51B))
				•	efined in 11 U.S.C. § 101(53A))
				-	r (as defined in 11 U.S.C. § 101(6))
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	s. If you in	dicate that you are ow statement, and f	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am n	ot filing under Chap	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	ling under Chapter	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am fi	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Part	Report if You Own or	Have An	/ Hazardo	us Property or An	y Property That Needs Immediate Attention
	Do you own or have any	■ No.	, mazarao	<u></u>	, i i oporty macroode illimodate mention
	property that poses or is				
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is t	he hazard?	
	public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	
	- ,				Number, Street, City, State & Zip Code

Debtor 1 James P. Magyar Case number (if known)

Part 5: Explain Your Effort

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 James P. Magyar			Case number	er (if known)
Par	t 6: Answer These Quest	ions for Rep	oorting Purposes		
16.	What kind of debts do you have?			nsumer debts? Consumer debts are definant, family, or household purpose."	ned in 11 U.S.C. § 101(8) as "incurred by an
		ſ	☐ No. Go to line 16b.		
		ı	Yes. Go to line 17.		
				siness debts? Business debts are debts stment or through the operation of the bus	
		Ī	☐ No. Go to line 16c.		
		I	☐ Yes. Go to line 17.		
		16c. S	State the type of debts you ov	we that are not consumer debts or busines	ss debts
17.	Are you filing under Chapter 7?	□ No. I	am not filing under Chapter 7	7. Go to line 18.	
	Do you estimate that after any exempt property is excluded and			o you estimate that after any exempt prop illable to distribute to unsecured creditors?	erty is excluded and administrative expenses?
	administrative expenses	ı	No		
	are paid that funds will be available for distribution to unsecured creditors?	[☐Yes		
18.	How many Creditors do	1 -49		□ 1,000-5,000	1 25,001-50,000
	you estimate that you owe?	□ 50-99		☐ 5001-10,000	5 0,001-100,000
		☐ 100-199 ☐ 200-999		□ 10,001-25,000	☐ More than100,000
19.	How much do you	\$0 - \$50	0,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your assets to be worth?		- \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion
			1 - \$500,000 11 - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
20.	How much do you	\$0 - \$50),000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	estimate your liabilities to be?		1 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion
			11 - \$500,000 11 - \$1 million	□ \$50,000,001 - \$100 million	☐ More than \$50 billion
Par	t 7: Sign Below				
	you	I have exa	mined this petition, and I decl	are under penalty of perjury that the inforr	mation provided is true and correct.
	•		•	I am aware that I may proceed, if eligible,	·
		United Sta	es Code. I understand the re	lief available under each chapter, and I ch	noose to proceed under Chapter 7.
				ot pay or agree to pay someone who is no notice required by 11 U.S.C. § 342(b).	ot an attorney to help me fill out this
		I request re	elief in accordance with the ch	napter of title 11, United States Code, spe	cified in this petition.
		bankruptcy and 3571.	case can result in fines up to	concealing property, or obtaining money of \$250,000, or imprisonment for up to 20 y	or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,
		James P.	P. Magyar Magyar	Signature of Debto	r 2
		Signature		-	
		Executed of		Executed on	
			MM / DD / YYYY	MM	I / DD / YYYY

Debtor 1 James P. Magyar		Cas	se number (if known)
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this petition, under Chapter 7, 11, 12, or 13 of title 11, United State for which the person is eligible. I also certify that I have	s Code, and have	explained the relief available under each chapter
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies, certify schedules filed with the petition is incorrect.		
. •	/s/ Frances Nicotra, Esq.	Date	March 22, 2018
	Signature of Attorney for Debtor		MM / DD / YYYY
	Frances Nicotra, Esq. 2495547		
	Printed name		
	Frances Nicotra, Esq./ Leonard R. Boyer, Es	q.	
	Firm name		
	853 Summit Ave		
	Jersey City, NJ 07307		
	Number, Street, City, State & ZIP Code		
	Contact phone (201) 963-9423, (973) 798-6131	Email address	Irbnjesq@gmail.com
	2495547 NY		
	Bar number & State		

Fill	in this informa	tion to identify your o	case:				
Deb	tor 1	James P. Magyar					
Deb	tor 2	First Name	Middle Name	Last Name			
(Spot	use if, filing)	First Name	Middle Name	Last Name			
Unit	ed States Bank	ruptcy Court for the:	EASTERN DISTRICT	OF NEW YORK			
Cas (if kno	e number				1	_	if this is an ded filing
						amend	aeu ming
∩ff	icial Form	n 106Sum					
			and Liabilities a	and Certain Statistical	Information	1	2/15
Be a infor your	s complete an mation. Fill ou original forms	d accurate as possible t all of your schedule s, you must fill out a r	le. If two married peopes first; then complete	ole are filing together, both are equal the information on this form. If you can the box at the top of this page	ually responsible for ou are filing amended	supplyin	g correct
Part	1: Summar	ize Your Assets					
						Your as Value o	ssets f what you own
1.	Schedule A/E 1a. Copy line	: Property (Official Fo 55, Total real estate, fro	orm 106A/B) om Schedule A/B			\$	0.00
	1b. Copy line	62, Total personal prop	perty, from Schedule A/E	В		\$	1,770.00
	1c. Copy line	63, Total of all property	on Schedule A/B			\$	1,770.00
Part	2: Summar	ize Your Liabilities					
							abilities you owe
2.			aims Secured by Prope nn A, Amount of claim, a	rty (Official Form 106D) at the bottom of the last page of Part	t 1 of Schedule D	\$	0.00
3.			Unsecured Claims (Office 1) (Office 1) (Priority unsecured cla	cial Form 106E/F) iims) from line 6e of <i>Schedule E/F</i>		\$	0.00
	3b. Copy the	total claims from Part 2	2 (nonpriority unsecured	d claims) from line 6j of Schedule E/l	F	\$	28,609.16
				Y	our total liabilities	\$	28,609.16
					L		
Part	3: Summar	ize Your Income and	Expenses				
4.		our Income (Official For onbined monthly income		ule I		\$	0.00
5.		our Expenses (Official nthly expenses from lir				\$	1,575.00
Part	4: Answer	These Questions for	Administrative and St	atistical Records			
6.	, ,		er Chapters 7, 11, or 13 on this part of the form.	3? Check this box and submit this form	n to the court with your	other sch	edules.
7.	■ Yes	debt do you have?					
••	■ Your del	ots are primarily cons		er debts are those "incurred by an inc 3-9g for statistical purposes. 28 U.S.		personal,	family, or
	☐ Your del	ots are not primarily o	consumer debts. You h	nave nothing to report on this part of	-	box and su	ubmit this form to
Offic	tne court cial Form 106S	with your other scheduum Summary o		bilities and Certain Statistical Info	ormation	r	page 1 of 2

Debto	or 1 James P.	Magyar	Case number (if known)	
		ent of Your Current Monthly Income: Copy your tota R. Form 122B Line 11: OR. Form 122C-1 Line 14.	al current monthly income from Official Form	\$ 0.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	James P. Magya	ar		
N - In 1 O	First Name	Middle Name	Last Name	
Debtor 2 Spouse, if filing)	First Name	Middle Name	Last Name	
Jnited States B	Sankruptcy Court for the	: EASTERN DISTRICT O	F NEW YORK	
Case number				☐ Check if this is a
				☐ Check if this is a amended filing
Official Fo	orm 106A/B			
Schedu	le A/B: Pro	perty		12/15
ink it fits best. formation. If monswer every que	Be as complete and accurate space is needed, attacestion.	rate as possible. If two marrich a separate sheet to this for	once. If an asset fits in more than one category, list the a ed people are filing together, both are equally responsibl m. On the top of any additional pages, write your name a e You Own or Have an Interest In	le for supplying correct
Do you own or	r have any legal or equital	ble interest in any residence,	building, land, or similar property?	
■ No. Go to Pa	, , ,	- ,		
_	e is the property?			
Part 2: Describe	e Your Vehicles			
			hicles, whether they are registered or not? Include	e any vehicles you own that
			hicles, whether they are registered or not? Include Jule G: Executory Contracts and Unexpired Leases.	e any vehicles you own that
omeone else di	rives. If you lease a veh		ule G: Executory Contracts and Unexpired Leases.	e any vehicles you own that
omeone else di	rives. If you lease a veh	icle, also report it on Sched	ule G: Executory Contracts and Unexpired Leases.	e any vehicles you own that
Cars, vans, t	rives. If you lease a veh	icle, also report it on Sched	ule G: Executory Contracts and Unexpired Leases.	e any vehicles you own that
Cars, vans, t No Yes Watercraft, a	rives. If you lease a veh irucks, tractors, sport	icle, also report it on Sched utility vehicles, motorcycl ATVs and other recreation	ule G: Executory Contracts and Unexpired Leases.	e any vehicles you own that
Cars, vans, t No Yes Watercraft, a	rives. If you lease a veh irucks, tractors, sport	icle, also report it on Sched utility vehicles, motorcycl ATVs and other recreation	ule G: Executory Contracts and Unexpired Leases. es nal vehicles, other vehicles, and accessories	e any vehicles you own that
Cars, vans, t No Yes Watercraft, a Examples: Bo	rives. If you lease a veh irucks, tractors, sport	icle, also report it on Sched utility vehicles, motorcycl ATVs and other recreation	ule G: Executory Contracts and Unexpired Leases. es nal vehicles, other vehicles, and accessories	e any vehicles you own that
Cars, vans, t No Yes Watercraft, a Examples: Bo	rives. If you lease a veh irucks, tractors, sport	icle, also report it on Sched utility vehicles, motorcycl ATVs and other recreation	ule G: Executory Contracts and Unexpired Leases. es nal vehicles, other vehicles, and accessories	e any vehicles you own that
omeone else di Cars, vans, t No Yes Watercraft, a Examples: Bo No Yes Add the dol	rives. If you lease a veh irucks, tractors, sport aircraft, motor homes, eats, trailers, motors, per	icle, also report it on Sched utility vehicles, motorcycl ATVs and other recreation rsonal watercraft, fishing ver	ule G: Executory Contracts and Unexpired Leases. es nal vehicles, other vehicles, and accessories	\$0.00
Cars, vans, t No Yes Watercraft, a Examples: Bo No Yes Add the dol pages you h	rives. If you lease a veh trucks, tractors, sport aircraft, motor homes, eats, trailers, motors, per lar value of the portion have attached for Part	atility vehicles, motorcycles, motorcycles, motorcycles, motorcycles, motorcycles, and other recreations and other recreations and watercraft, fishing versions are you own for all of your elegations. Write that number here usehold Items	es nal vehicles, other vehicles, and accessories ssels, snowmobiles, motorcycle accessories entries from Part 2, including any entries for	
omeone else di Cars, vans, t No Yes Watercraft, a Examples: Bo No Yes Add the dol pages you h Part 3: Describ- Do you own or	rives. If you lease a veh trucks, tractors, sport aircraft, motor homes, hats, trailers, motors, per lar value of the portion have attached for Part e Your Personal and Hour have any legal or equ	atility vehicles, motorcycles, motorcycles, motorcycles, motorcycles, motorcycles, motorcycles, and other recreation resonal watercraft, fishing versions and own for all of your ended to the control of	es nal vehicles, other vehicles, and accessories ssels, snowmobiles, motorcycle accessories entries from Part 2, including any entries for	
Cars, vans, t No Yes Watercraft, a Examples: Bo No Yes Add the dol pages you h Part 3: Describ- Do you own or Household g Examples: No No	aircraft, motor homes, hats, trailers, motors, per lar value of the portion have attached for Part e Your Personal and Hour have any legal or equipoods and furnishings lajor appliances, furnitures.	atility vehicles, motorcycles, motorcycles, motorcycles, motorcycles, motorcycles, motorcycles, and other recreation resonal watercraft, fishing versions and own for all of your ended to the control of	es nal vehicles, other vehicles, and accessories ssels, snowmobiles, motorcycle accessories entries from Part 2, including any entries for entries from Part 2 including any entries for ele following items?	\$0.00 Current value of the portion you own? Do not deduct secured
Cars, vans, t No Yes Watercraft, a Examples: Bo No Yes Add the dol pages you h Part 3: Describe Do you own or Household g Examples: No	aircraft, motor homes, pats, trailers, motors, per lar value of the portion nave attached for Part e Your Personal and Hour have any legal or equipoods and furnishings flajor appliances, furnituicribe	ATVs and other recreation sonal watercraft, fishing versional watercraft, fishing versions with the transfer of the control of	es nal vehicles, other vehicles, and accessories ssels, snowmobiles, motorcycle accessories entries from Part 2, including any entries for entries from Part 2 including any entries for ele following items?	\$0.00 Current value of the portion you own? Do not deduct secured

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Debtor 1	James P. Ma	agyar Case number (if it	known)
■ Yes.	. Describe		
		Television Location: 64 Boyce Avenue, Staten Island NY 10306	\$200.00
Examp ■ No		figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamons, memorabilia, collectibles	p, coin, or baseball card collections;
9. Equipm Examp ■ No	nent for sports a	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; ca	anoes and kayaks; carpentry tools;
■ No		s, shotguns, ammunition, and related equipment	
☐ No		othes, furs, leather coats, designer wear, shoes, accessories	
		Clothing Location: 64 Boyce Avenue, Staten Island NY 10306	\$600.00
☐ No	ry aples: Everyday je . Describe	welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, g	gems, gold, silver
		Jewelry Location: 64 Boyce Avenue, Staten Island NY 10306	\$50.00
Exam No □ Yes. 14. Any or □ No	arm animals nples: Dogs, cats, Describe ther personal an Give specific inf	d household items you did not already list, including any health aids you did not	
		Location: 64 Boyce Avenue, Staten Island NY 10306	\$200.00
		of all of your entries from Part 3, including any entries for pages you have attach number here	ed \$1,750.00
	escribe Your Finan wn or have any I	cial Assets egal or equitable interest in any of the following?	Current value of the
,		,	portion you own? Do not deduct secured claims or exemptions.

Debtor 1	James P. Magyar	Case number (if known)	
16. Cash Exam	nples: Money you have in your wallet, in your home, in a	a safe deposit box, and on hand when you file your petition	
■ Yes			
		Cash Location: 64 Boyce Avenue, Staten Island NY 10306	\$20.00
	sits of money nples: Checking, savings, or other financial accounts; co institutions. If you have multiple accounts with the	ertificates of deposit; shares in credit unions, brokerage houses, and one e same institution, list each.	other similar
■ No □ Yes	I	Institution name:	
	s, mutual funds, or publicly traded stocks nples: Bond funds, investment accounts with brokerage	firms, money market accounts	
	Institution or issuer name:		
	oublicly traded stock and interests in incorporated a venture	and unincorporated businesses, including an interest in an LLC,	partnership, and
	. Give specific information about them	% of ownership:	
Nego Non-i ■ No	rnment and corporate bonds and other negotiable a stiable instruments include personal checks, cashiers' conegotiable instruments are those you cannot transfer to a. Give specific information about them	checks, promissory notes, and money orders.	
	Issuer name:		
Exam ■ No	ement or pension accounts apples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), to the contract of the country and the country account separately.	thrift savings accounts, or other pension or profit-sharing plans	
00		Institution name:	
Your	rity deposits and prepayments share of all unused deposits you have made so that you ples: Agreements with landlords, prepaid rent, public until the property of the property	ou may continue service or use from a company utilities (electric, gas, water), telecommunications companies, or others	3
	<u></u> I	Institution name or individual:	
23. Annui	ities (A contract for a periodic payment of money to you	u, either for life or for a number of years)	
	Issuer name and description.		
	sts in an education IRA, in an account in a qualified s.C. $\S\S$ 530(b)(1), 529A(b), and 529(b)(1).	I ABLE program, or under a qualified state tuition program.	
	Institution name and description. Separ	rately file the records of any interests.11 U.S.C. § 521(c):	
25. Trusts	s, equitable or future interests in property (other tha	an anything listed in line 1), and rights or powers exercisable for	your benefit
	. Give specific information about them		
	ts, copyrights, trademarks, trade secrets, and other apples: Internet domain names, websites, proceeds from		

D	ebtor 1	James P. Magyar	Case number (if known)	
	☐ Yes.	Give specific information about them		
27		ses, franchises, and other general intangibles poles: Building permits, exclusive licenses, cooperative association ho	oldings, liquor licenses, professional licenses	3
	☐ Yes.	Give specific information about them		
M	oney or	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28	. Tax ref	funds owed to you		
	☐ Yes.	Give specific information about them, including whether you already	filed the returns and the tax years	
29	Examp	r support poles: Past due or lump sum alimony, spousal support, child support, dive specific information	maintenance, divorce settlement, property s	ettlement
30		amounts someone owes you oles: Unpaid wages, disability insurance payments, disability benefits benefits; unpaid loans you made to someone else	s, sick pay, vacation pay, workers' compens	ation, Social Security
	☐ Yes.	Give specific information		
31		sts in insurance policies ples: Health, disability, or life insurance; health savings account (HSA)	A); credit, homeowner's, or renter's insuranc	e
	☐ Yes.	Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
32	If you a	terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance has died.	ance policy, or are currently entitled to receive	ve property because
	■ No	Give specific information		
	— 100.	Sive specific informations.		
33		s against third parties, whether or not you have filed a lawsuit or poles: Accidents, employment disputes, insurance claims, or rights to		
		Describe each claim		
34	Other	contingent and unliquidated claims of every nature, including co	ounterclaims of the debtor and rights to s	set off claims
		Describe each claim		
35	_ `	nancial assets you did not already list		
	■ No □ Yes.	Give specific information		
36		the dollar value of all of your entries from Part 4, including any eart 4. Write that number here	. • .	\$20.00
Pa	art 5: De	scribe Any Business-Related Property You Own or Have an Interest In. L	ist any real estate in Part 1.	
37.	Do you	own or have any legal or equitable interest in any business-related prope	erty?	
	No. Go	o to Part 6.		
	☐ Yes. 0	Go to line 38.		

Deb	tor 1 James P. Magyar		Case number (if known)	
Part	6: Describe Any Farm- and Commercial Fishing-Related Property You Only 19 you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. [Oo you own or have any legal or equitable interest in any farm- o	or commercial fishir	ng-related property?	
	■ No. Go to Part 7.			
	☐ Yes. Go to line 47.			
Part	7: Describe All Property You Own or Have an Interest in That You	Did Not List Above		
	Examples: Season tickets, country club membership No Yes. Give specific information Add the dollar value of all of your entries from Part 7. Write tha	t number here		\$0.00
	Part 1: Total real estate, line 2			\$0.00
	Part 2: Total vehicles, line 5	\$0.00	_	Ψοιου
57.	Part 3: Total personal and household items, line 15	\$1,750.00		
58.	Part 4: Total financial assets, line 36	\$20.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$1,770.00	Copy personal property total	\$1,770.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$1,770.00

						<u> </u>		
Fill	in this informa	ation to identify your ca	se:					
Del	otor 1	James P. Magyar						
		First Name	Middle Name	L	ast Name			
	otor 2 ouse if, filing)	First Name	Middle Name	L	ast Name			
Llni	tod States Bank	cruptcy Court for the:	EASTERN DISTRICT OF NE	=\^/ \/	OPK			
OIII	ileu States Darir	rupicy Court for the.	LASTERN DISTRICT OF NE	- ۷۷ 1	ONN			
	se number					Check if this is an amended filing		
<u>Of</u>	ficial For	<u>m 106C</u>						
Sc	chedule	C: The Prop	perty You Cla	im	as Exempt	4/16		
the p	property you list	ed on Schedule A/B: Pro attach to this page as ma	perty (Official Form 106A/B)	as yo	our source, list the property that you	or supplying correct information. Using claim as exempt. If more space is additional pages, write your name and		
spe any func exe	cific dollar amo applicable sta ds—may be un mption to a pai	ount as exempt. Alterna tutory limit. Some exem limited in dollar amoun	atively, you may claim the for ptions—such as those for t. However, if you claim an	ull fai heal exen	ir market value of the property be th aids, rights to receive certain b nption of 100% of fair market valu	One way of doing so is to state a sing exempted up to the amount of penefits, and tax-exempt retirement the under a law that limits the the your exemption would be limited		
Pai	t 1: Identify	the Property You Claim	n as Exempt					
1.	Which set of e	exemptions are you clai	ming? Check one only, ever	n if yo	our spouse is filing with you.			
	☐ You are clai	ming state and federal no	onbankruptcy exemptions. 1	11 U.S	S.C. § 522(b)(3)			
	_	· ·	. , .		3 - (-)(-)			
		ming federal exemptions.	3 (, , , ,					
2.	For any prope	For any property you list on <i>Schedule A/B</i> that you claim as exempt, fill in the information below.						
		n of the property and line o at lists this property	on Current value of the portion you own Copy the value from	Amount of the exemption you claim Check only one box for each exemption.		Specific laws that allow exemption		
			Schedule A/B	One	on only one box for each exemption.			
	Household f		\$700.00		\$700.00	11 U.S.C. § 522(d)(3)		
	Island NY 10 Line from Sche		en ———		100% of fair market value, up to any applicable statutory limit			
	Television	Boyce Avenue, State	\$200.00		\$200.00	11 U.S.C. § 522(d)(3)		
	Island NY 10 Line from Sche	306			100% of fair market value, up to any applicable statutory limit			
	Clothing	Boyce Avenue, State	\$600.00		\$600.00	11 U.S.C. § 522(d)(3)		
	Island NY 10 Line from Sche	306			100% of fair market value, up to any applicable statutory limit			
	Jewelry	Davis Avenus Ctat	\$50.00		\$50.00	11 U.S.C. § 522(d)(4)		
	Island NY 10 Line from Sche		GII		100% of fair market value, up to any applicable statutory limit			
	Tools		\$200.00		\$200.00	11 U.S.C. § 522(d)(5)		
	Location: 64 Island NY 10	Boyce Avenue, State 306	en — — — — — — — — — — — — — — — — — — —	_	100% of fair market value, up to any applicable statutory limit			

Official Form 106C

Эе	ebtor 1 James P. Magyar		Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.	
	Cash Location: 64 Boyce Avenue, Staten	\$20.00	\$20.00	11 U.S.C. § 522(d)(5)
	Island NY 10306 Line from Schedule A/B: 16.1	100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every No			nt.)
	Yes. Did you acquire the property cover No Yes	ed by the exemption wi	thin 1,215 days before you filed this case'	?

Official Form 106C

Fill in this infor	mation to identify your	case:			
Debtor 1	James P. Magyar				
	First Name	Middle Name	Last Name	_	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		EASTERN DISTRICT C	F NEW YORK		
Case number					
(if known)					Check if this is an
					amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

Official Form 106D

Fill in this inf	formation to identify your	case:					
Debtor 1	James P. Magyar						
	First Name	Middle Na	me	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Na	me	Last Name			
United States	Bankruptcy Court for the:	EASTERN D	ISTRICT OF NE	W YORK			
Case number (if known)			-			_	heck if this is an mended filing
	orm 106E/F • E/F: Creditors W	/ho Have	Unsecured	d Claims			12/15
any executory of Schedule G: Ex Schedule D: Cro left. Attach the name and case	and accurate as possible. Us contracts or unexpired leases ecutory Contracts and Unexp editors Who Have Claims Sec Continuation Page to this pag number (if known).	that could resul pired Leases (Off ured by Property ge. If you have no	It in a claim. Also icial Form 106G). y. If more space i o information to r	o list executory of . Do not include s needed, copy	contracts on Schedule A/B: P any creditors with partially s the Part you need, fill it out, I	Property (Official ecured claims number the ent	al Form 106A/B) and on that are listed in tries in the boxes on the
1. Do any cre	editors have priority unsecure	d claims agains	t you?				
No. Go	to Part 2.						
☐ Yes.							
Part 2: Lis	t All of Your NONPRIORIT	Y Unsecured	Claims				
☐ No. You ☐ Yes. 4. List all of y	white the creditor separately claim, list the creditor separately	art. Submit this fo	orm to the court wit	the creditor who	o holds each claim. If a credite		
than one cr Part 2.	editor holds a particular claim, li	ist the other credi	tors in Part 3.If you	u have more thar	three nonpriority unsecured cl	aims fill out the	Continuation Page of
							Total claim
4.1 Afni ,			Last 4 digits of a	ccount number	1153		\$836.04
1310 P.O.	iority Creditor's Name Martin Luther King D Box 3517 mington, IL 61702-3517		When was the de	bt incurred?	Opened unknown La 9/25/16	ast Active	
Numbe	er Street City State Zlp Code ncurred the debt? Check one.		As of the date yo	u file, the claim	is: Check all that apply		
■ De	btor 1 only		☐ Contingent				
☐ De	btor 2 only		☐ Unliquidated				
☐ De	btor 1 and Debtor 2 only		☐ Disputed				
☐ At	least one of the debtors and and	Ottioi	Type of NONPRIC	ORITY unsecure	d claim:		
	eck if this claim is for a comr	munity	Student loans				
debt Is the	claim subject to offset?		Obligations aris		aration agreement or divorce th	at you did not	
■ No			Debts to pension	on or profit-sharir	ng plans, and other similar debt	S	
☐ Ye	s		Other. Specify	Collection	account AT&T Mobility	1	

Debtor	1 James P. Magyar		Case number (if know)	
4.2	Celentano Stadtmauer etal Nonpriority Creditor's Name	Last 4 digits of account number	2576	\$3,388.00
	Notchview Office Park 1035 Route 46 East Suite B208	When was the debt incurred?	Opened 8/23/14 Last Active 8/09/16	
	Clifton, NJ 07015-2594 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Collection a Medical Ce	account Englewood Hospital & nter	
4.3	Celentano Stadtmauer etal	Last 4 digits of account number	0638	\$640.00
	Nonpriority Creditor's Name Notchview Office Park 1035 Route 46 East Suite B208	When was the debt incurred?	Opened 8/23/14 Last Active 2/09/16	
	Clifton, NJ 07015-2594 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharin	or plans, and other similar debts	
	— NO		account Emergency Physicians	
	Yes	Other. Specify of Englewo		
4.4	Comenity Bank/Express Nonpriority Creditor's Name	Last 4 digits of account number	2680	\$262.30
	P.O. Box 659728 San Antonio, TX 78265-9728	When was the debt incurred?	Opened unknown Last Active 9/17/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim		
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another Type of NONPRIORITY uns		d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	,	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Clothing pu	urchases	

Debtor	1 James P. Magyar		Case number (if know)	
4.5	Credit Collection Service Nonpriority Creditor's Name	Last 4 digits of account number	3212	\$41.14
	Two Wells Avenue Newton, MA 02459	When was the debt incurred?	Opened unknown Last Active 10/16/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Collection	account Geico Insurance	
4.6	Credit Collection Service	Last 4 digits of account number	4678	\$117.90
	Nonpriority Creditor's Name Two Wells Avenue Newton, MA 02459	When was the debt incurred?	Opened unknown Last Active 4/06/16	
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	Obligations arising out of a separe report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	□Yes	Other. Specify Collection	account Wells Fargo Bank	
4.7	Credit First, N.A.	Last 4 digits of account number	9703	\$1,293.32
	Nonpriority Creditor's Name			Ψ1,200.02
	P.O. Box 81410 Cleveland, OH 44181-0410	When was the debt incurred?	Opened unknown Last Active 10/23/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other Specify Household		

Debtor	1 James P. Magyar		Case number (if know)			
4.8	FreedomRoad Financial Nonpriority Creditor's Name	Last 4 digits of account number	3429	\$7,772.04		
	P.O. Box 4597 Oak Brook, IL 60522-4597	When was the debt incurred?	Opened unknown Last Active 8/01/17			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent				
	Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	Liter			
	At least one of the debtors and another Check if this claim is for a community debt the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not			
	No	Debts to pension or profit-sharir				
	Yes	Other. Specify Repossess	ion deficiency			
-	Hackensack Foot and Ankle Nonpriority Creditor's Name	Last 4 digits of account number	6935	\$250.00		
	24 Bergen Street Suite 1 Hackensack, NJ 07601-5461	When was the debt incurred?	Opened 3/04/15 Last Active 4/07/16			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt		d claim:			
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing plans, and other similar debts				
	□ Yes	Other. Specify Medical bil				
4.1	Insurance Deisgn Admin Nonpriority Creditor's Name	Last 4 digits of account number	0680	\$20.00		
	153 Bauer Drive Oakland, NJ 07436	When was the debt incurred?	Opened 3/28/15 Last Active 12/16/15			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated ☐ Disputed				
	☐ Debtor 1 and Debtor 2 only					
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecure ☐ Student loans ☐ Obligations arising out of a separeport as priority claims	d claim:			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	□Yes	■ Other. Specify Medical bil	ı			

ebtor 1	James P. Magyar	Case number (if know)			
.1	Midland Credit Management	Last 4 digits of account number	5874	\$705.15	
	Nonpriority Creditor's Name 2365 Northside Drive Suite 300 San Diego, CA 92108	When was the debt incurred?	Opened unknown Last Active 11/30/16		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	_	☐ Student loans			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts		
	Yes	■ Other. Specify Collection	account Citibank, N.A.		
1	NBCC	Last 4 digits of account number	6073	\$500.00	
	Nonpriority Creditor's Name				
	P.O. Box 16 Irvington, NY 10533	When was the debt incurred?	Opened 8/22/14 Last Active 4/13/16		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	■ Other. Specify Collection a Bergen Am	account Township of North bulance		
- 1	Northland Group Inc.	Last 4 digits of account number	8610	\$2,449.37	
	Nonpriority Creditor's Name P.O. Box 390900 Mail Code UBN11	When was the debt incurred?	Opened unknown Last Active 11/19/16		
_	Minneapolis, MN 55439 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	_	П			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:		
	At least one of the debtors and another	Student loans	a viuiiii.		
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin			
	□ NO □ Yes	Other Specify Collection:			

Debto	or 1 James P. Magyar		Case number (if know)					
4.1 4	Sychb/Old Navy	Last 4 digits of account number	0995	Unknown				
	Nonpriority Creditor's Name P.O. Box 965004 Orlando, FL 32896-5004	When was the debt incurred?	Opened unknown Last Active 2/19/15					
	Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply	\$710.68				
	Who incurred the debt? Check one.	_						
	Debtor 1 only	Contingent						
	Debtor 2 only	Unliquidated						
	Debtor 1 and Debtor 2 only	Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims	·					
	■ No	Debts to pension or profit-sharin						
	Yes	Other. Specify Household	goods, clothing purchases					
4.1 5	TD Bank	Last 4 digits of account number	7512	\$710.68				
	Nonpriority Creditor's Name	_	Opened unknown Leet Active					
	1540 Hylan Boulevard Staten Island, NY 10305	When was the debt incurred?	Opened unknown Last Active 1/05/17					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	Yes	Other. Specify Bank overc	Iraft					
4.1	US Bank/Harley-Davidson	Last 4 digits of account number	8610	Unknown				
6	Nonpriority Creditor's Name	Last 4 digits of account number						
	P.O. Box 6339 Fargo, ND 58125-6339	When was the debt incurred?	Opened unknown Last Active 8/19/14	Unknown				
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	Unknown				
	Who incurred the debt? Check one.							
	Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	Check if this claim is for a community	Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
	No	Debts to pension or profit-sharin	o plans, and other similar debts					
	— INU	·	goods, food, clothing					
	Yes	Other. Specify purchases	goods, rood, crottining					

Debtor 1	James P. Magyar		Case number (if know)					
	Vells Fargo Bank, N.A.	Last 4 digits of account number	0001	\$9,623.22				
P	lonpriority Creditor's Name P.O. Box 95225 Albuguerque, NM 87199-5225	When was the debt incurred?	Opened unknown Last Active 8/01/17					
N	lumber Street City State Zlp Code //ho incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	Debtor 1 only	☐ Contingent						
Г	Debtor 2 only	☐ Unliquidated						
Г	Debtor 1 and Debtor 2 only	☐ Disputed						
Г	At least one of the debtors and another	Type of NONPRIORITY unsecur	ed claim:					
Г	Check if this claim is for a community	☐ Student loans						
	ebt		paration agreement or divorce that you did not					
_	s the claim subject to offset?	report as priority claims						
	No	Debts to pension or profit-shar						
	Yes	Other. Specify Installmer	nt loan					
Part 3:	List Others to Be Notified About a De	bt That You Already Listed						
is trying have mo	to collect from you for a debt you owe to so	omeone else, list the original creditor at you listed in Parts 1 or 2, list the add	you already listed in Parts 1 or 2. For examp in Parts 1 or 2, then list the collection agency ditional creditors here. If you do not have add	here. Similarly, if you				
Name and		On which entry in Part 1 or Part 2 did yo	_					
Alliance			Part 1: Creditors with Priority Unsecured Clai					
4650 E. Suite 30	Street Road 00		Part 2: Creditors with Nonpriority Unsecured	Claims				
	e, PA 19053							
		Last 4 digits of account number	4796					
Name and		On which entry in Part 1 or Part 2 did yo						
	hysicians Englewood		Part 1: Creditors with Priority Unsecured Clai					
P.O. Bo	x 3200 polis, IN 46206	· ·	Part 2: Creditors with Nonpriority Unsecured	Claims				
	505,	Last 4 digits of account number	EPE1					
Name and	Address	On which entry in Part 1 or Part 2 did yo	ou list the original creditor?					
_	ood Hospital	Line 4.2 of (Check one):	Part 1: Creditors with Priority Unsecured Clai	ms				
	le Street	1	Part 2: Creditors with Nonpriority Unsecured	Claims				
Englew	ood, NJ 07631	Last 4 digits of account number						
Name and	Address Ditan Asset Recov.	On which entry in Part 1 or Part 2 did yo Line 4.8 of (Check one):	ru list the original creditor? □ Part 1: Creditors with Priority Unsecured Clai	ms				
P.O. Bo			Part 2: Creditors with Nonpriority Unsecured					
Vincent	own, NJ 08088	Last 4 digits of account number	8365					
Name and	Address Control Recovery	On which entry in Part 1 or Part 2 did yo Line 4.4 of (<i>Check one</i>):	ru list the original creditor? □ Part 1: Creditors with Priority Unsecured Clai	ms				
120 Cor	porate Blvd		Part 2: Creditors with Nonpriority Unsecured					
Suite 1	VA 00500		. alt 2. Greaters than the products	olao				
NOTTOIK,	, VA 23502	Last 4 digits of account number						
Name and	Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?					
	argo Bank	· · · · · · · · · · · · · · · ·	Part 1: Creditors with Priority Unsecured Clai	ms				
Persona P.O. Bo	al Lines & Loans		Part 2: Creditors with Nonpriority Unsecured	Claims				
	x 93399 erque, NM 87199							
		Last 4 digits of account number						

Part 4: Add the Amounts for Each Type of Unsecured Claim

Debtor 1	James P. Magyar	Case number (if know)
----------	-----------------	-----------------------

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims om Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
om rait i	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
				· -	
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
	Oi.				
Total claims	OI.				
claims	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
			6g. 6h.	\$ 	0.00
claims	6g.	you did not report as priority claims	•	· —	

Fill in this infor	ill in this information to identify your case:						
Debtor 1	James P. Magyar						
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK				
Case number							
(if known)							

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	Company with Name, Number	whom you have the r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>

Official Form 106G

=:u : 4b	· · · · · · · · · · · · · · · · · · ·				
	is information to identify your c	ase:			
Debtor 1	James P. Magyar First Name	Middle Name	Last Name		
Debtor 2 (Spouse if,		Middle Name	Last Name		
United S	tates Bankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK		
Case nu	mher				
(if known)					Check if this is an amended filing
_	al Form 106H dule H: Your Cod e	ebtors			12/15
/our nam 1. Do □ N ■ Y	ne and case number (if known). o you have any codebtors? (If you	Answer every question. ou are filing a joint case, o	do not list either spouse as	a codebtor.	p of any Additional Pages, write
Arizo	ona, California, Idaho, Louisiana, l o. Go to line 3. es. Did your spouse, former spous	Nevada, New Mexico, Pu	erto Rico, Texas, Washing		
in liı Forr	ne 2 again as a codebtor only if	that person is a guarant	tor or cosigner. Make su	re you have listed t	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and ZIP	Code		Column 2: The cr Check all schedul	editor to whom you owe the debt es that apply:
3.1	Carole Magyar 64 Boyce Avenue Staten Island, NY 10306-11	40		☐ Schedule D, I ■ Schedule E/F ☐ Schedule G _ FreedomRoad	, line <u>4.8</u>
3.2	Stephanie Lagala 64 Boyce Avenue Staten Island, NY 10306			☐ Schedule D, I ■ Schedule E/F ☐ Schedule G TD Bank	, line 4.15

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Fill	in this information to identify your ca	ase:								
	otor 1 James P. Ma									
	otor 2				_					
Uni	ted States Bankruptcy Court for the	: EASTERN DISTRICT	OF NEW YORK		_					
	se number nown)					□ An		d filing ent showing	g postpetitio	
\bigcirc	fficial Form 106I								ollowing date	:
	chedule I: Your Inc	omo				MN	Л / DD/ Y	YYY		12/15
sup spo	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form.	are married and not filing with spouse is not filing with	g jointly, and your s th you, do not include	spouse i de inforr	s livi natio	ng with yon about y	ou, incli your spo	ude inforn ouse. If mo	nation abou ore space is	t your needed,
Par	t 1: Describe Employment									
1.	Fill in your employment information.		Debtor 1				Debtor 2	or non-fi	ling spouse	
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	☐ Employed				☐ Emplo	oyed		
		Employment status	■ Not employed				☐ Not e	mployed		
		Occupation								
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed th	nere?							
Par	t 2: Give Details About Mor	nthly Income								
spou If yo	mate monthly income as of the dause unless you are separated. u or your non-filing spouse have more space, attach a separate sheet to	ore than one employer, co	Č					·	•	J
						For Debt	or 1		otor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	\$	N/A	_
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	_
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$.	(0.00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	James P. Magyar		Cas	se number (if k	nown) _				
	0	and the same			or Debtor 1	2.00				pouse	
	Cop	y line 4 here	4.	\$		0.00	<u>)</u>	\$		N/A	
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	. \$	(0.00)	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b			0.00)	\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c			0.00)	\$		N/A	
	5d.	Required repayments of retirement fund loans	5d			0.00	_	\$		N/A	
	5e.	Insurance	5e			0.00	_	\$		N/A	
	5f.	Domestic support obligations	5f.			0.00	_	\$		N/A	
	5g.	Union dues	5g			0.00	_	\$		N/A	
	5h.	Other deductions. Specify:	_ 5h	.+ \$		0.00	_ +	- \$		N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	-	0.00	<u>) </u>	\$		N/A	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$		0.00	<u>) </u>	\$		N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	ı. \$		0.00	n	\$		N/A	
	8b.	Interest and dividends	8b			0.00	_	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c			0.00	_	\$		N/A	
	8d.	Unemployment compensation	8d			0.00	_	\$		N/A	
	8e.	Social Security	8e	. \$		0.00)	\$		N/A	
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	_ 8f. 8g	,		0.00 0.00	_	\$		N/A N/A	
	8h.	Other monthly income. Specify:	_	ı.+ \$		0.00		· \$		N/A	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	-	0.00)	\$		N/A	
10.	Cald	culate monthly income. Add line 7 + line 9.	10.	\$	0.00	+	\$		N/A	= \$	0.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				1 L					
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your per friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depe		, ,		,		nedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies							12.	\$	0.00
13.	Do y	you expect an increase or decrease within the year after you file this form No.	?							Combined monthly in	
		Yes. Explain: Debtor is laid off during the winter months.									

Official Form 106I Schedule I: Your Income page 2

Fill	in this information to identify	your case:					
Deb	otor 1 James P. N	lagyar			Che	ck if this is:	
	otor 2 ouse, if filing)					An amended filing A supplement show 13 expenses as of	wing postpetition chapter the following date:
Unit	ted States Bankruptcy Court for the	ne: EASTE	RN DISTRICT OF NEW Y	ORK		MM / DD / YYYY	
Cas	se number						
(If k	nown)						
0	fficial Form 106J						
S	chedule J: Your	Exper	nses				12/15
Be	as complete and accurate a ormation. If more space is r mber (if known). Answer ev	as possible needed, atta	. If two married people ar ich another sheet to this	e filing together, b form. On the top of	oth are equ f any additi	ually responsible fo onal pages, write y	or supplying correct your name and case
	t 1: Describe Your Hou	sehold					
1.	Is this a joint case?						
	■ No. Go to line 2. □ Yes. Does Debtor 2 live	e in a separ	ate household?				
	□ No						
		ust file Offic	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Deb	otor 2.	
2.	Do you have dependents	? ■ No					
	Do not list Debtor 1 and Debtor 2.	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state the						□ No
	dependents names.						□ Yes □ No
							☐ Yes
				_		_	□ No
							Yes
							□ No □ Yes
3.	Do your expenses include	e =	No			_	□ res
	expenses of people other yourself and your depend	than _	Yes				
	<u> </u>						
Est	tt 2: Estimate Your Ong- timate your expenses as of penses as of a date after the plicable date.	your bankr	uptcy filing date unless y				
the	lude expenses paid for witle value of such assistance a ficial Form 106l.)					Your exp	enses
	,						
4.	The rental or home owne payments and any rent for			nclude first mortgag	e 4.	\$	500.00
	If not included in line 4:						
	4a. Real estate taxes				4a.		0.00
	4b. Property, homeowne				4b.		0.00
	4c. Home maintenance,4d. Homeowner's associated				4c. 4d.		0.00
5.	Additional mortgage pavi			me equity loans	4u. 5.	·	0.00

Debtor 1	James P	. Magyar	Case nu	mber (if known	n)
i. Util	ities:				
6a.		heat, natural gas	66	a. \$	0.00
6b.	•	ver, garbage collection		o. \$	0.00
6c.		, cell phone, Internet, satellite, and cable service		c. \$	75.00
6d.	Other. Spe		60	· · · · · · · · · · · · · · · · · · ·	0.00
	•	ekeeping supplies		7. \$	200.00
		hildren's education costs		3. \$	0.00
		ry, and dry cleaning		9. \$	100.00
	-	roducts and services	10		100.00
	_	ntal expenses	11		
		•	1	і. Ф	100.00
	not include ca	Include gas, maintenance, bus or train fare.	12	2. \$	100.00
		clubs, recreation, newspapers, magazines, a		· <u> </u>	0.00
		ributions and religious donations		1. \$	0.00
	urance.	ibations and rengious donations	1-	τ. Ψ	0.00
		surance deducted from your pay or included in li	nes 4 or 20.		
	. Life insura	, , ,		a. \$	0.00
	. Health insu		15k		0.00
	. Vehicle ins		150		0.00
		rance. Specify:	150	· · ·	0.00
		clude taxes deducted from your pay or included		μ. Ψ	0.00
	ecify:	cidde taxes deducted from your pay or included	16	5. \$	0.00
		ease payments:	176	. ¢	0.00
		ents for Vehicle 1		a. \$	0.00
		ents for Vehicle 2	17t		0.00
	. Other. Spe		170	· -	0.00
	. Other. Spe	·	170	d. \$	0.00
		of alimony, maintenance, and support that yo		3. \$	0.00
		your pay on line 5, Schedule I, Your Income (s you make to support others who do not live		\$	
	ecify:	you make to support others who do not live	with you.		0.00
		erty expenses not included in lines 4 or 5 of t			
		on other property		a. \$	0.00
	. Real estate			o. \$	0.00
		nomeowner's, or renter's insurance		c. \$	0.00
		ce, repair, and upkeep expenses	200	· · ·	-
				· -	0.00
		er's association or condominium dues	206		0.00
1. O th	er: Specify:	Tolls	21	I. + \$	400.00
		monthly expenses			
22a	. Add lines 4	through 21.		\$	1,575.00
22b	. Copy line 22	2 (monthly expenses for Debtor 2), if any, from C	official Form 106J-2	\$	
		a and 22b. The result is your monthly expenses.		\$	1,575.00
		, , ,			1,070.00
	-	nonthly net income.			
		12 (your combined monthly income) from Sched		a. \$	0.00
23b	. Copy your	monthly expenses from line 22c above.	23k	o\$	1,575.00
230	. Subtract ye	our monthly expenses from your monthly income).		4 575 00
		is your monthly net income.	230	c. \$	-1,575.00
4. Do	you expect a	ın increase or decrease in your expenses wit	hin the year after you file th	is form?	
		u expect to finish paying for your car loan within the yeaterms of your mortgage?	ar or do you expect your mortgag	e payment to ir	ncrease or decrease because of a
		, 55			
	Yes.	Explain here:			

Fill in this inf	formation to identify your	case:			
Debtor 1	James P. Magyar				
Dahtano	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK		
Case number					
(if known)					☐ Check if this is an amended filing
	orm 106Dec				
Declara	ation About a	n Individual	Debtor's Sch	iedules	12/15
	Sign Below pay or agree to pay some	one who is NOT an attor	ney to help you fill out bar	nkruptcy forms?	
■ No					
☐ Yes	s. Name of person				cy Petition Preparer's Notice, Signature (Official Form 119)
	enalty of perjury, I declare are true and correct.	that I have read the sum	mary and schedules filed	with this declaration an	d
X /s/ J	ames P. Magyar		X		
	es P. Magyar ature of Debtor 1		Signature of De	ebtor 2	
Date	March 22, 2018		Date		

Official Form 106Dec

Fill in this in	nformation to identify your	case:					
Debtor 1							
Deptor i	James P. Magyar First Name	Middle Name	Last Name				
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name				
United State	s Bankruptcy Court for the:	EASTERN DISTRICT OF NEW	YORK				
Case numbe	er						
	Form 107 ent of Financial A	Affairs for Individua	ls Filing for Bankruptcy	4/16			
information.		ttach a separate sheet to this fo	ing together, both are equally responsiorm. On the top of any additional page				
Part 1: G	ive Details About Your Mar	ital Status and Where You Lived	d Before				
1. What is	What is your current marital status?						
□ Ма	rried						
■ No	t married						
2. During	During the last 3 years, have you lived anywhere other than where you live now?						
□ No	□ No						
Yes	s. List all of the places you liv	red in the last 3 years. Do not inclu	ude where you live now.				
Debtor	1 Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Address:	Dates Debtor 2 lived there			
Apt. 2	agan Place cus, NJ 07094	From-To: September 2014 to January 2015	☐ Same as Debtor 1	☐ Same as Debtor 1 From-To:			
	nnwood Terrace ee, NJ 07024	From-To: September 2010 to September 2014	☐ Same as Debtor 1	☐ Same as Debtor 1 From-To:			
states and te	<i>rritori</i> es include Arizona, Calif		uivalent in a community property state New Mexico, Puerto Rico, Texas, Washii Form 106H).				
Part 2 Ex	xplain the Sources of Your	Income					
Fill in the	e total amount of income you e filing a joint case and you h	received from all jobs and all bus	usiness during this year or the two pre inesses, including part-time activities. ether, list it only once under Debtor 1.	evious calendar years?			
□ No ■ Ye:	s. Fill in the details.						
. 50		Debtor 1	Debtor 2				

Official Form 107

Debtor 1 James P. Magyar Case				e number (if known)					
					Debtor 1		Deleter 0		
					Sources of income	Gross income	Debtor 2 Sources of income	Gross income	
					Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)	
			dar year: December	31, 2017)	■ Wages, commissions, bonuses, tips	\$29,362.00	☐ Wages, commissions, bonuses, tips		
					☐ Operating a business		☐ Operating a business		
			lar year be December		■ Wages, commissions, bonuses, tips	\$12,855.00	☐ Wages, commissions, bonuses, tips		
					☐ Operating a business		☐ Operating a business		
			lar year: December	31, 2015)	■ Wages, commissions, bonuses, tips	\$14,657.00	☐ Wages, commissions, bonuses, tips		
					☐ Operating a business		☐ Operating a business		
	List e	each s	•	the gross inco	Debtor 1 Sources of income Describe below.		•	Gross income (before deductions	
					Describe below.	(before deductions and exclusions)	Describe below.	and exclusions)	
			lar year be December		IRA Distribution	\$76.00			
			lar year: December	31, 2015)	Unemployment Compensation	\$16,796.00			
Pa	art 3:	List	Certain Pa	yments You	Made Before You Filed for	Bankruptcy			
6.	Are e		Debtor 1's	or Debtor 2 ebtor 1 nor D	's debts primarily consume	r debts? umer debts. Consumer debts	are defined in 11 U.S.C. § 10	1(8) as "incurred by an	
	During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?								
No. Go to line 7.									
	Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do								
	not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.						i.		
	•	Yes.			or both have primarily consumer you filed for bankruptcy, di		of \$600 or more?		
			■ No.	Go to line 7	·.				
	Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to attorney for this bankruptcy case.								

Deb	tor 1 James P. Magyar		Cas	se number (if known)				
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payn	nent for		
	Within 1 year before you filed for bankrupt Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	artners; relatives of any ge a control, or owner of 20%	eneral partners; partnorn or more of their votin	erships of which you	ou are a general p ny managing age	eartner; corporations nt, including one for		
	■ No □ Yes. List all payments to an insider.							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	is payment		
	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos		yments or transfer	any property on a	ccount of a debi	t that benefited an		
	■ No							
	☐ Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for th			
D-11	Identify Land Actions Democracia	us and Fancalsauma	paid	still owe	Include credito	r's name		
Part	4: Identify Legal Actions, Repossession	ns, and Foreclosures						
	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.							
	Case title Case number	Nature of the case	Court or agency	,	Status of the	case		
	Vithin 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.							
	No. Go to line 11.							
	Yes. Fill in the information below.							
	Creditor Name and Address	Describe the Property Explain what happene		Date		Value of the property		
	FreedomRoad Financial P.O. Box 4597	2009 Harley-Davidson Fat Boy			September \$7,930.00 2017			
	Oak Brook, IL 60522-4597	■ Property was reposs □ Property was forecle □ Property was garnis	osed.	2017				
		☐ Property was attach	ed, seized or levied.					
	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec ■ No □ Yes. Fill in the details.		cluding a bank or fi	nancial institutior	n, set off any am	ounts from your		
	Creditor Name and Address	Describe the action th	ne creditor took	Date taker	action was	Amount		
2.	Within 1 year before you filed for bankrupt	cy, was any of your prop	perty in the possess			of creditors, a		
	court-appointed receiver, a custodian, or a		•	-		·		
	■ No □ Yes							

Official Form 107

Deb	btor 1 James P. Magyar	Case number	(if known)					
Par	rt 5: List Certain Gifts and Contributions							
13.	Within 2 years before you filed for bankruptcy,	did you give any gifts with a total value of more t	han \$600 per person	?				
	■ No							
	Yes. Fill in the details for each gift.							
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value				
	Person to Whom You Gave the Gift and Address:							
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No							
	Yes. Fill in the details for each gift or contribution.							
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value				
Par	rt 6: List Certain Losses							
	how the loss occurred Include	ibe any insurance coverage for the loss e the amount that insurance has paid. List pending	Date of your loss	Value of property lost				
		nce claims on line 33 of Schedule A/B: Property.						
Par	t 7: List Certain Payments or Transfers							
16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.							
	No No Sill in the details							
	Yes. Fill in the details. Person Who Was Paid	Description and value of any property	Date payment	Amount of				
	Address Email or website address Person Who Made the Payment, if Not You	transferred	or transfer was	payment				
	Leonard R. Boyer, Esq. Boyer Coffy, LLC 970 Clifton Avenue Suite 201 Clifton, NJ 07013	Attorney fees	August 2017	\$1,435.00				
	001 Debtorcc Inc. 378 Summit Avenue Jersey City, NJ 07306	Credit counseling	August 14, 2017	\$14.95				

Debtor	1	Jam	ies l	P. I	Mad	gvar

Case number (if known)

17.	Within 1 year before you filed for bankruptcy promised to help you deal with your creditors. Do not include any payment or transfer that you No Yes. Fill in the details.	s or to make payments			r transfer any proper	ty to anyone who
	Person Who Was Paid Address	Description and v	alue of any prop	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankruptournsferred in the ordinary course of your buinclude both outright transfers and transfers mad include gifts and transfers that you have already No Yes. Fill in the details.	siness or financial affa de as security (such as t	t irs? he granting of a se			
	Person Who Received Transfer Address Person's relationship to you	Description and v property transfer			nny property or received or debts change	Date transfer was made
19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-protection No ☐ Yes. Fill in the details.		y property to a s	elf-settled tru	st or similar device o	f which you are a
	Name of trust	Description and v	alue of the prope	erty transferre	ed	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Inst	ruments, Safe Deposit	Boxes, and Stor	rage Units		
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associ No Yes. Fill in the details.	other financial accou	nts; certificates c	of deposit; sha		
		Last 4 digits of account number	Type of accountinstrument	clos	e account was sed, sold, ved, or nsferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 ye cash, or other valuables? No Yes. Fill in the details.	ear before you filed for	bankruptcy, any	safe deposit	box or other deposit	ory for securities,
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the c	contents	Do you still have it?
22.	Have you stored property in a storage unit or	place other than your	home within 1 y	ear before yo	u filed for bankruptcy	/?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe the c	contents	Do you still have it?

Det	tor 1 James P. Magyar		Case number (if known)	
Par	9: Identify Property You Hold or Control for	Someone Else		
23.	Do you hold or control any property that some for someone.	one else owns? Include any prope	erty you borrowed from, are storing for	, or hold in trust
	■ No □ Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Par	t 10: Give Details About Environmental Inform	ation		
For	he purpose of Part 10, the following definitions	apply:		
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	ir, land, soil, surface water, grour		
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		I law, whether you now own, operate, o	or utilize it or used
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		ıs waste, hazardous substance, toxic s	substance,
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of whe	en they occurred.	
24.	Has any governmental unit notified you that yo	u may be liable or potentially liabl	le under or in violation of an environme	ental law?
	■ No			
	Yes. Fill in the details. Name of site	Governmental unit	Environmental law, if you	Date of notice
	Address (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State a ZIP Code)	•	Date of Hotioc
25.	Have you notified any governmental unit of any	release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or admini	strative proceeding under any en	vironmental law? Include settlements a	and orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	Give Details About Your Business or Con	nections to Any Business		
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have a	any of the following connections to any	business?
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity	y, either full-time or part-time	
	☐ A member of a limited liability company	(LLC) or limited liability partners	hip (LLP)	
	☐ A partner in a partnership			
	☐ An officer, director, or managing execu	tive of a corporation		

Official Form 107

 $\hfill\square$ An owner of at least 5% of the voting or equity securities of a corporation

Case 1-18-41560-nhl Doc 1 Filed 03/22/18 Entered 03/22/18 10:35:40

Deb	tor 1 James P. Magyar	C	ase number (if known)
	No. None of the above applies. Go to	Part 12.	
	Yes. Check all that apply above and fil	Il in the details below for each business.	
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
,	(Name of the control	Name of accountant or bookkeeper	Dates business existed
28.	institutions, creditors, or other parties.	tcy, did you give a financial statement to a	anyone about your business? Include all financial
	■ No □ Yes. Fill in the details below.		
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Par	12: Sign Below		
are t	e read the answers on this <i>Statement of Fi</i> rue and correct. I understand that making a a bankruptcy case can result in fines up to .S.C. §§ 152, 1341, 1519, and 3571.	false statement, concealing property, or	I declare under penalty of perjury that the answers obtaining money or property by fraud in connection ears, or both.
	James P. Magyar		
	nes P. Magyar nature of Debtor 1	Signature of Debtor 2	
Dat	March 22, 2018	Date	
Did : ■ N □ Y	-	ent of Financial Affairs for Individuals Fili	ng for Bankruptcy (Official Form 107)?
■ N	vou pay or agree to pay someone who is no o es. Name of Person . Attach the <i>Bankr</i> o		
		apicy i culion i repaiers ivolice, Deciaration,	and dignature (dilidari diliri 119).

Fill in this inform	mation to identify your o	case:		
Debtor 1	James P. Magyar			7
	First Name	Middle Name	Last Name	
Debtor 2	E N			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTR	RICT OF NEW YORK	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Fo	rm 108			
		n for Indiv	iduals Filing Under Chapt	for 7
Statemen	iii Oi iiiieiiiio	ii ioi iiidi	riduais i illing Officer Chapt	IEF / 12/15
If you are an indi	ividual filing under char	oter 7. vou must fi	Il out this form if:	
	e claims secured by you	. •		
_	sed personal property a		not expired	
			you file your bankruptcy petition or by the date	set for the meeting of creditors,
whiche on the	•	e court extends th	e time for cause. You must also send copies to t	he creditors and lessors you list
	eople are filing together nd date the form.	in a joint case, bo	oth are equally responsible for supplying correct	information. Both debtors must
· ·				
	and accurate as possible our name and case nun		s needed, attach a separate sheet to this form. O	n the top of any additional pages,
write y	our name and case num	ibei (ii kilowii).		
Part 1: List Yo	our Creditors Who Have	Secured Claims		
1 For any credit	ore that you listed in Pa	rt 1 of Schodulo F	D: Creditors Who Have Claims Secured by Proper	rty (Official Form 106D) fill in the
information be		irt i oi Schedule L	o. Creditors who have Claims Secured by Proper	ty (Oniciai Form 100D), illi ili the
Identify the cro	editor and the property the	nat is collateral	What do you intend to do with the property th secures a debt?	at Did you claim the property as exempt on Schedule C?
				ao onompi en concamio o
Creditor's			☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	□Yes
Description of			☐ Retain the property and enter into a Reaffirmation Agreement.	□ Yes
property			Retain the property and [explain]:	
securing debt:	:		Tretain the property and [explain].	
_				
Creditor's			☐ Surrender the property.	□No
name:			☐ Retain the property and redeem it.	_
Description of			☐ Retain the property and enter into a	☐ Yes
Description of			Reaffirmation Agreement.	
property securing debt:			☐ Retain the property and [explain]:	
occurring dobt.	•			
Creditor's			☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	_
_			Retain the property and enter into a	☐ Yes
Description of			Reaffirmation Agreement.	
property			☐ Retain the property and [explain]:	
securing debt:	•			

Official Form 108

Creditor's

Statement of Intention for Individuals Filing Under Chapter 7

☐ Surrender the property.

☐ No

Debtor 1	James P. Magyar	Case number (if R	known)
name:		Detain the property and redeem it	☐ Yes
name.		Retain the property and redeem it.	□ Yes
Descrip	otion of	☐ Retain the property and enter into a Reaffirmation Agreement.	
propert		Retain the property and [explain]:	
securin		= rectain the property and [explain].	
	9		
Part 2:	List Your Unexpired Personal Proper	rty Leases	
n the info	rmation below. Do not list real estate	t you listed in Schedule G: Executory Contracts and Une leases. Unexpired leases are leases that are still in effect rty lease if the trustee does not assume it. 11 U.S.C. § 36	ct; the lease period has not yet ended.
Describe	your unexpired personal property lea	ases	Will the lease be assumed?
Lessor's n	name:		□ No
	n of leased		
Property:			☐ Yes
Lessor's n			□ No
	n of leased		_
Property:			☐ Yes
Lessor's n	name:		□ No
	n of leased		
Property:			☐ Yes
Lessor's n			□ No
Property:	n of leased		☐ Yes
			☐ Yes
Lessor's n			□ No
Description Property:	n of leased		□ V
r roporty.			☐ Yes
Lessor's n			□ No
Description Property:	n of leased		☐ Yes
r roporty.			☐ Yes
Lessor's n	name: on of leased		□ No
Property:			☐ Yes
Part 3:	Sign Below		
	nalty of perjury, I declare that I have ir hat is subject to an unexpired lease.	ndicated my intention about any property of my estate th	at secures a debt and any personal
	ames P. Magyar	X	
	es P. Magyar	X Signature of Debtor 2	
	ature of Debtor 1	ŭ	
Date	March 22, 2018	Date	

Official Form 108

Fill in this in	ormation to identify your case:				only as d	irected in this form and	in Form
Debtor 1	James P. Magyar		122	2A-1Supp:			
Debtor 2 (Spouse, if filing	· -		'	■ 1. There is	s no pres	umption of abuse	
United State	s Bankruptcy Court for the: Eastern District of	New York	'	applies	will be n	o determine if a presurnade under <i>Chapter</i> 7	•
Case number	er		_ ,	☐ 3. The Me	ans Test	does not apply now be	
						service but it could ap	ply later.
Official	Form 122A - 1			☐ Check if	this is a	n amended filing	
			م دا دا داد				
Cnapte	r 7 Statement of Your Cu	rrent ivior	ntniy inc	ome			12/15
attach a separ case number qualifying mil	te and accurate as possible. If two married people ate sheet to this form. Include the line number to vift known). If you believe that you are exempted frow tary service, complete and file Statement of Exemple Calculate Your Current Monthly Income	which the addition m a presumption	nal information a of abuse becau	applies. On the	top of an	ny additional pages, wri narily consumer debts o	te your name and or because of
	s your marital and filing status? Check one o	nlv					
_	married. Fill out Column A. lines 2-11.	my.					
_	ried and your spouse is filing with you. Fill o	ut both Columns	Δ and R lines	2-11			
_	ried and your spouse is NOT filing with you.		·	2 11.			
_	iving in the same household and are not leg	•	•	lumns A and	R lines 2	D-11	
_	iving separately or are legally separated. Fill				,		ı declare under
F	penalty of perjury that you and your spouse are ving apart for reasons that do not include evadi	egally separated	d under nonban	kruptcy law t	hat applie	es or that you and your	
101(10A). I the 6 mont	average monthly income that you received from all For example, if you are filing on September 15, the 6-n as, add the income for all 6 months and divide the tota on the same rental property, put the income from that	nonth period would I by 6. Fill in the re	be March 1 throusult. Do not include	ugh August 31. de any income	If the amo amount m	ount of your monthly incon ore than once. For examp	ne varied during ble, if both
				Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
	ross wages, salary, tips, bonuses, overtime, deductions).	and commission	ons (before all	\$	0.00	\$	
Colum	3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. \$ 0.00 \$						
of you from ar and roo	counts from any source which are regularly por your dependents, including child support a unmarried partner, members of your househol mmates. Include regular contributions from a specific point include payments you listed on line 3.	. Include regular d, your depende	contributions nts, parents,	\$	0.00	\$	
	come from operating a business, profession,	or farm		·		·	
			otor 1				
Gross i	receipts (before all deductions)	\$					
Ordina	y and necessary operating expenses	-\$ 0.00					
	nthly income from a business, profession, or far	m \$0.00	Copy here ->	\$	0.00	\$	
6. Net inc	ome from rental and other real property	Dala	stor 1				
0	oppints (hafans all dadustisses)	\$ 0.00	otor 1				
	receipts (before all deductions)	-\$ 0.00 -\$					
	y and necessary operating expenses nthly income from rental or other real property	·	Copy here ->	\$	0.00	\$	
	t, dividends, and royalties	Ψ	.1.7	\$	0.00	\$	
i. interes	i, airiasilas, alia loyallies						

Official Form 122A-1

Case number (if known)

					Column A Debtor 1	1	Column B Debtor 2 o non-filing		
8.	Unemp	loyment compensation			\$	0.00	\$		
		enter the amount if you contend that the amount ial Security Act. Instead, list it here:	received was a benefi	it under			· 		
			0.0	00					
	For y	ou \$ our spouse \$							
9.	Pension	n or retirement income. Do not include any amunder the Social Security Act.		s a	\$	0.00	\$		
10.	Do not i	from all other sources not listed above. Spenclude any benefits received under the Social Sd as a victim of a war crime, a crime against hunc terrorism. If necessary, list other sources on a ow.	ecurity Act or payment nanity, or international	ts or					
					\$	0.00	\$		
					\$	0.00	\$		
		Total amounts from separate pages, if any.		+	\$	0.00	\$		
11.		te your total current monthly income. Add lin lumn. Then add the total for Column A to the tot		\$	0.00	+ \$_		= \$	0.00
								Total cu	rrent monthly
Part	2: [Determine Whether the Means Test Applies to	you You					income	
12.	Calcula	te your current monthly income for the year.	Follow these steps:						
	12a. Co	py your total current monthly income from line 1	1		Со	py line 11	here=>	\$	0.00
	Mu	ultiply by 12 (the number of months in a year)						x 1	
	12b. Th	e result is your annual income for this part of the	e form				12b	D. \$	0.00
13.	Calcula	te the median family income that applies to y	ou. Follow these step	s:					
	Fill in th	e state in which you live.	NY						
	Fill in th	e number of people in your household.	1						
	To find a	e median family income for your state and size of a list of applicable median income amounts, go	online using the link sp	ecified	in the sepa	rate instruc	13.	\$5	2,024.00
	for this f	form. This list may also be available at the banki	ruptcy clerk's office.						
14.	How do	the lines compare?							
	14a.	Line 12b is less than or equal to line 13. Or Go to Part 3.	n the top of page 1, ch	eck box	1, There is	s no presun	nption of abus	se.	
	14b.	☐ Line 12b is more than line 13. On the top o Go to Part 3 and fill out Form 122A-2.	f page 1, check box 2,	The pr	esumption	of abuse is	determined b	y Form 12.	2A-2.
Part	3: 8	Sign Below							
	Ву	signing here, I declare under penalty of perjury	that the information or	this sta	atement an	d in any atta	achments is t	rue and co	rrect.
	Y	/s/ James P. Magyar							
	_	James P. Magyar Signature of Debtor 1							
	Date	March 22, 2018 MM / DD / YYYY							
		ou checked line 14a, do NOT fill out or file Form	n 122A-2.						
	If y	ou checked line 14b, fill out Form 122A-2 and fi	le it with this form.						

James P. Magyar

Debtor 1

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of New York

	lawaa D. Maa			245	cern Distric	. 011(0), 1				
In r	e <u>James P. Maç</u>	зуаr			De	ebtor(s)		ase No. hapter	7	
					DC	0001(3)	C.	парил		
	DIS	SCLO	SURE O	F COMPE	ENSATION	OF ATTO	ORNEY FO	OR DE	EBTOR(S)	
1.	Pursuant to 11 U .S. compensation paid to be rendered on beha	to me w	ithin one year	before the fili	ing of the petition	on in bankrupt	cy, or agreed to	be paid	to me, for servi	
	For legal service	es, I ha	ve agreed to a	accept			\$_		1,435.00	
	Prior to the filin								1,435.00	
	Balance Due								0.00	
2.	The source of the co	mpensa	ation paid to n	ne was:						
	Debtor		Other (specif	y):						
3.	The source of compo	ensatio	n to be paid to	me is:						
	Debtor		Other (specif	y):						
4.	■ I have not agree	d to sha	are the above-	disclosed comp	pensation with	any other pers	on unless they	are memb	pers and associa	ntes of my law firm.
	☐ I have agreed to copy of the agre									my law firm. A
5.	In return for the abo	ove-disc	closed fee, I ha	ave agreed to r	ender legal serv	vice for all asp	ects of the bank	cruptcy c	ase, including:	
	a. Analysis of the db. Preparation and fc. Representation o	filing of	f any petition,	schedules, sta	tement of affair	rs and plan wh	ich may be requ	uired;	-	bankruptcy;
	reaffirmat	ons wi tion ag	ith secured preements a	nd application	reduce to ma ons as neede ousehold goo	d; preparati				
6.		ntation	or(s), the aborof the debtersary proceed	ors in any di	ee does not incl	ude the follow by actions, ju	ing service: Idicial lien av	oidance	es, relief from	n stay actions or
					CERTIFIC	CATION				
	I certify that the fore bankruptcy proceeding		is a complete	statement of ar	ny agreement o	r arrangement	for payment to	me for re	epresentation of	the debtor(s) in
r	March 22, 2018				/s/	Frances Nic	otra, Esq.			
1	Date						a, Esq. 24955	547		
					Fra	<i>nature of Attor</i> ances Nicotr 3 Summit Av	a, Esq./ Leon	ard R. I	Boyer, Esq.	
					Je: (20	rsey City, NJ 01) 963-9423,	J 07307 , (973) 798-61	31 Fax	:: (201)503-81	50
						njesq@gma me of law firm				
						- •				

United States Bankruptcy Court Eastern District of New York

In re	James P. Magyar	Case No.		
		Debtor(s) Chapter	7	

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

Date: March 22, 2018

/s/ James P. Magyar

James P. Magyar

Signature of Debtor

/s/ Frances Nicotra, Esq.

Signature of Attorney

Frances Nicotra, Esq. 2495547

Frances Nicotra, Esq./ Leonard R. Boyer, Esq.

853 Summit Ave

Jersey City, NJ 07307

(201) 963-9423, (973) 798-6131 Fax: (201)503-8150

USBC-44 Rev. 9/17/98

Afni, Inc. 1310 Martin Luther King D P.O. Box 3517 Bloomington, IL 61702-3517

Alliance One 4850 E. Street Road Suite 300 Trevose, PA 19053

Carole Magyar 64 Boyce Avenue Staten Island, NY 10306-1140

Celentano Stadtmauer etal Notchview Office Park 1035 Route 46 East Suite B208 Clifton, NJ 07015-2594

Celentano Stadtmauer etal Notchview Office Park 1035 Route 46 East Suite B208 Clifton, NJ 07015-2594

Comenity Bank/Express P.O. Box 659728 San Antonio, TX 78265-9728

Credit Collection Service Two Wells Avenue Newton, MA 02459

Credit Collection Service Two Wells Avenue Newton, MA 02459

Credit First, N.A. P.O. Box 81410 Cleveland, OH 44181-0410

Emer Physicians Englewood P.O. Box 3266 Indianapolis, IN 46206

Englewood Hospital 350 Engle Street Englewood, NJ 07631

FreedomRoad Financial P.O. Box 4597 Oak Brook, IL 60522-4597

Hackensack Foot and Ankle 24 Bergen Street Suite 1 Hackensack, NJ 07601-5461

Insurance Deisgn Admin 153 Bauer Drive Oakland, NJ 07436

Metropolitan Asset Recov. P.O. Box 2222 Vincentown, NJ 08088

Midland Credit Management 2365 Northside Drive Suite 300 San Diego, CA 92108

NBCC P.O. Box 16 Irvington, NY 10533

Northland Group Inc. P.O. Box 390900 Mail Code UBN11 Minneapolis, MN 55439

Portfolio Recovery 120 Corporate Blvd Suite 1 Norfolk, VA 23502

Stephanie Lagala 64 Boyce Avenue Staten Island, NY 10306 Sychb/Old Navy P.O. Box 965004 Orlando, FL 32896-5004

TD Bank 1540 Hylan Boulevard Staten Island, NY 10305

US Bank/Harley-Davidson P.O. Box 6339 Fargo, ND 58125-6339

Wells Fargo Bank Personal Lines & Loans P.O. Box 93399 Albuquerque, NM 87199

Wells Fargo Bank, N.A. P.O. Box 95225 Albuquerque, NM 87199-5225 Case 1-18-41560-nhl Doc 1 Filed 03/22/18 Entered 03/22/18 10:35:40

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

STATEMENT PURSUANT TO LOCAL BANKRUPTCY RULE 1073-2(b)

DEBTOR(S):	James P. Magyar	CASE NO.:.
	Local Bankruptcy Rule 1073-2(b Cases, to the petitioner's best known), the debtor (or any other petitioner) hereby makes the following disclosure wledge, information and belief:
was pending at any spouses or ex-spous partnership and one have, or within 180	time within eight years before the es; (iii) are affiliates, as defined in or more of its general partners; (v	arposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are a 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a i) are partnerships which share one or more common general partners; or (vii) ner of the Related Cases had, an interest in property that was or is included in the
✓ NO RELATED	CASE IS PENDING OR HAS BE	EEN PENDING AT ANY TIME.
THE FOLLOW	ING RELATED CASE(S) IS PEN	IDING OR HAS BEEN PENDING:
1. CASE NO.:	JUDGE: DISTRICT/I	DIVISION:
CASE STILL PENI	OING (Y/N):	[If closed] Date of closing:
CURRENT STATI	US OF RELATED CASE:	
		(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE RELATED (Re	fer to NOTE above):
	LISTED IN DEBTOR'S SCHED	ULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
2. CASE NO.:	JUDGE: DISTRICT/I	DIVISION:
CASE STILL PENI	DING (Y/N):	[If closed] Date of closing:
CURRENT STATI	US OF RELATED CASE:	
		(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE RELATED (Re	fer to NOTE above):
	LISTED IN DEBTOR'S SCHED	ULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
3. CASE NO.:	JUDGE: DISTRICT/I	DIVISION:
CASE STILL PENI	DING (Y/N):	[If closed] Date of closing:

DISCLOSURE OF RELATED CASES (cont'd)	
CURRENT STATUS OF RELATED CASE: (Discharg	ged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer to NOTE	Cabove):
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("FSCHEDULE "A" OF RELATED CASE:	REAL PROPERTY") WHICH WAS ALSO LISTED IN
<i>NOTE:</i> Pursuant to 11 U.S.C. § 109(g), certain individuals who hat be eligible to be debtors. Such an individual will be required to fi	ave had prior cases dismissed within the preceding 180 days may not le a statement in support of his/her eligibility to file.
TO BE COMPLETED BY DEBTOR/PETITIONER'S ATTORNE	EY, AS APPLICABLE:
I am admitted to practice in the Eastern District of New York (Y/N	N): <u>Y</u>
CERTIFICATION (to be signed by pro se debtor/petitioner or deb	otor/petitioner's attorney, as applicable):
I certify under penalty of perjury that the within bankruptcy case i as indicated elsewhere on this form.	s not related to any case now pending or pending at any time, except
/s/ Frances Nicotra / Leonard Boyer	
Frances Nicotra / Leonard Boyer #2495547 / #010241984 Signature of Debtor's Attorney 853 Summit Avenue Jersey City, NJ 07307	Signature of Pro Se Debtor/Petitioner
Phone: (201) 963-9423 Fax: (201) 963-2005	Signature of Pro Se Joint Debtor/Petitioner
	Mailing Address of Debtor/Petitioner
	City, State, Zip Code
Esilone to fully and toughtfully appoint all information as a size of hou	Area Code and Telephone Number

Rev.8/11/2009

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

NOTE: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

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